

IHIN

Event Notification System

Powered by ICA's SmartAlerts Technology

Delivering every patient ADT*
Event in Iowa for better healthcare

***Admit, Discharge, or Transfer**

You don't know... what you don't know

How long does it take a care team to learn a high-risk patient was admitted for chest pain to another hospital in another city?

- **Costs can go up the longer you are unaware that a member was admitted to another ER or Inpatient while traveling out of town.**
- **It would be helpful if Care Coordinators were notified of this right away for specific members.**
- **While possible today it is not being done across organization boundaries.**



Moving beyond basic connections to interoperability and intelligence



SmartAlerts[®]

- Start with ADT events
- ADT comes from a mature part of the hospital information system and has been available for some time.
- ADT connections are common within organizations but not statewide
- Start simple... build on it

THE
INTEROPERABILITY
EXPERTS

ADT Trigger Events

Possible if the data comes

- Admit/visit notification.
- Transfer a patient
- Discharge/end visit
- Register a patient
- Pre-admit a patient
- Change an inpatient to an outpatient
- Update patient information
- Cancel admit/visit notification
- Cancel discharge/ end visit
- Swap patients
- Merge patient information
- Add person information
- Update person information
- Merge patient information ID only
- Merge patient information account number only
- Merge visit – visit number

Who – Patient

What – Admits and Discharges

When – Real Time

Where – Inpatient and ER,

Why – To inform immediately

How to make this happen

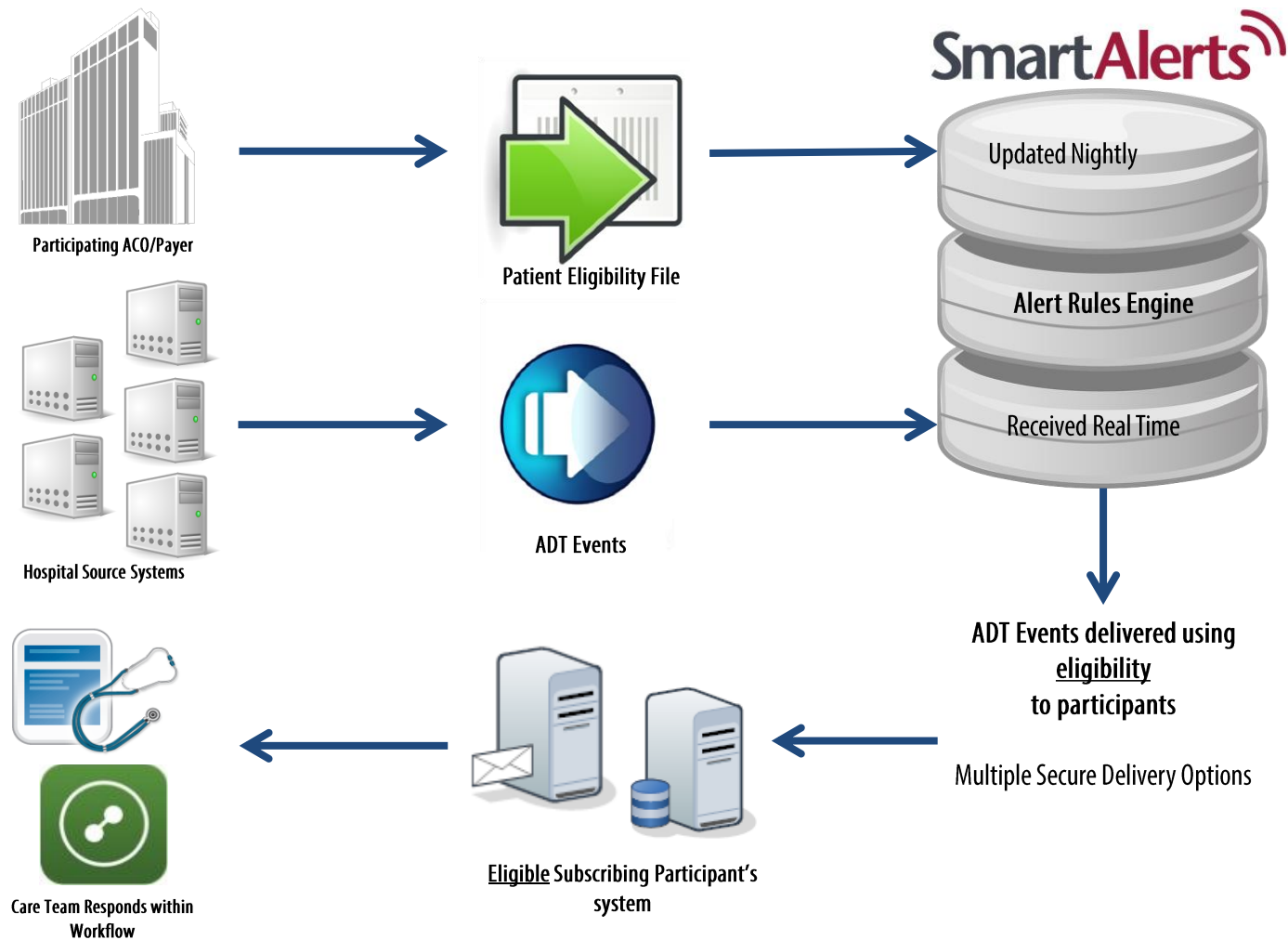
Build it:

- Connect all hospitals in Iowa to send ADT to the IHIN alert engine.
- IME will then provide the ACO patient lists for the system to use to route those ADT messages.

Use it:

- Care Coordinators can then be set up to receive them to use it to improve outcomes.

IHIN Notifications - ADT Events



2015 Initial Roll-out

- Three identified Use Cases:
 - ED Discharge
 - Inpatient Admission
 - Inpatient Discharge
- Must have participation from hospitals in each ACO
- Limit alerts to direct feeds at the ACO level only
- Medicaid members with PCP assignments

Expansion Opportunities

- More Use Cases (pharmacy, urgent care, LTC, etc...)
- More payers (Medicaid MCOs, Private payers, etc..)
- Alerts to clinics and care teams using both direct feeds and direct messaging options

SOME CHANGE REQUIRED...

Move from old technology to interoperability.

Solve “real-world” workflow challenges

Its time!

